UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorn	ney Docket No.	FFMP	01	
First I	nventor	R40		
Title	AWALYTICAL	METAODS	AND	COMPOSTICO

	al applications under 37 CFR 1.53(b))	Express Mail Laber No. C C C C C C C C C C C C C C C C C C	_					
APPLICA	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Packets Application						
See MPEP chapter 600 conc	erning utility patent application contents.	Washington, DC 20231						
1. (Submit an original and a d		7. CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>) 8. Nucleotide and/or Amino Acid Sequence Submission						
See 37 CFR 1.27. Specification (preferred arrangement - Descriptive title	[Total Pages 1 4] set forth below)	(if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on:						
 Statement Rega Reference to see or a computer p Background of t 		i. CD-ROM or CD-R (2 copies); or i i. paper c. Statements verifying identity of above copies						
- Brief Summary	of the Invention of the Drawings (<i>if filed</i>)	ACCOMPANYING APPLICATION PARTS						
- Detailed Descrip - Claim(s) - Abstract of the I	otion	9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of Attorney						
4. Drawing(s) (35 U.	S.C. 113) Total Sheets	11. English Translation Document (if applicable)						
5. Oath or Declaration	[Total Pages]	12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations	,					
	ited (original or copy)	13. Preliminary Amendment						
b. Copy from a (for continuat	prior application (37 CFR 1.63 (d)) ion/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
	ON OF INVENTOR(S)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
named in t	rement attached deleting inventor(s) ne prior application, see 37 CFR and 1 33(b)	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
6. Application Data Sheet. See 37 CFR 1.76 17. Other:								
or in an Application Data She	et under 37 CFR 1.76:	the requisite information below and in a preliminary amendmen	t,					
Continuation Prior application information	Divisional Continuation-in-part (CIP) Examiner	of prior application No						
For CONTINUATION OR DIVISION 55, is considered a part of	ONAL APPS only: The entire disclosure of the the disclosure of the accompanying continuation.	prior application, from which an oath or declaration is supplied unde tion or divisional application and is hereby incorporated by reference antly omitted from the submitted application parts.						
	19. CORRESPONDE	NCE ADDRESS	_					
Customer Number or Bar Co	(insert Customer No. or Attach bar	or Correspondence address below						
Name	JAMES WILCOX							
	IMMUNTION CORP							
Address	3401 MASONS MILL	ROAD SUIT 100						
City	HUNTENG DON VALLEY	State PA Zip Code 19096						
Country	U S A Tele	phone 215 430 07)) Fax 217 830 02	57					
Name (Print/Type)	JAMES L. WILLO)	Registration No. (Attorney/Agent) 30,234	7					
Signature	Shirt	Date /1-29-01	٦					

Burden Hour Statement This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

PTO/SB/17 (11-01)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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F	EE	TR	AN	SM	IT	TAL
	,	for	FY	200)2	

Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	3	7	0
(P)	_	/	_

Complete if Known					
Application Number					
Filing Date					
First Named Inventor					
Examiner Name					
Group Art Unit					
Attorney Docket No.	FFMPOI				

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)					
Check Credit card Money Other None				3. ADDITIONAL FEES					
Deposit /	Account	— Order — —	Large	Entity	Sma	il Entit	<u>v</u>		
Deposit		,	Fee Cod	Fee			Fee Description	Fee Paid	
Account Number			105	e (\$) 130	205	le (\$) 65	Surcharge - late filing fee or oath		
Deposit Account	ļ		127	50	227		· ·		
Name L			121	30	221	25	Surcharge - late provisional filing fee or cover sheet		
1 1	ioner is authori: (s) indicated belo	ized to: (check all that apply)	139	130	139	130	Non-English specification		
		ow Credit any overpayments i) during the pendency of this application	147	2,520	147	2,520	For filing a request for ex parte reexamination		
		ow, except for the filing fee	112	920*	112	920*	Requesting publication of SIR prior to		
	entified deposit a	=	112	4 040*	442	4 0 4 0 *	Examiner action		
	FEE CA	ALCULATION	113	1,840*	113	1,840	Requesting publication of SIR after Examiner action		
1. BASIC FI			115	110	215	55	Extension for reply within first month		
Large Entity			116	400	216	200	Extension for reply within second month		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description Fee Paid	117	920	217	460	Extension for reply within third month		
101 740	201 370	Utility filing fee	118	1,440	218	720	Extension for reply within fourth month		
106 330	206 165	Design filing fee	128	1,960	228	980	Extension for reply within fifth month		
107 510	207 255	Plant filing fee	119	320	219	160	Notice of Appeal		
108 740	208 370	Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal		
114 160	214 80	Provisional filing fee	121	280	221	140	Request for oral hearing		
•	SI	UBTOTAL (1) (\$) 370		1,510	1	1,510	Petition to institute a public use proceeding		
2 EVIDA C			140	110	240	55	Petition to revive - unavoidable		
Z. EATRA U		FOR UTILITY AND REISSUE		1,280	241	640	Petition to revive - unintentional		
Total Claims		Extra Claims below Fee Paid		1,280		640	Utility issue fee (or reissue)		
Total Claims Independent	20**		143	460	243	230	Design issue fee		
Claims Multiple Dependent			144	620	244	310	Plant issue fee		
at.a = at	done	L	122	130	122	130	Petitions to the Commissioner	——— 	
Large Entity	Small Entity		123	50	123	50	Processing fee under 37 CFR 1 17(q)		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	126	180	126	180	Submission of Information Disclosure Stmt	——— !	
103 18	203 9	Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)		
102 84	202 42	Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection		
104 280	204 140	Multiple dependent claim, if not paid	140	7.0	2.0		(37 ČFR § 1 129(a))		
109 84	209 42	** Reissue independent claims over original patent	149	740	249	370	For each additional invention to be examined (37 CFR § 1 129(b))		
110 18	210 9	** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)		
•		and over original patent	169	900	169	900	Request for expedited examination of a design application		
	SUBT	ГОТАL (2) (\$)	Other	fee (sp	ecify)				
**or number	previously paid,	if greater, For Reissues, see above	*Redı	iced by	Basic	Filing	Fee Paid SUBTOTAL (3) (\$)	1.	

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	JAMES L. WILLOX	Registration No (Attomey/Agent)	30,234	Telephone	(703	1598-2805
Signature	Ahri"			Date	11-	-29-01

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